

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIED			
FORMALITY REVIEW	AK	931	10-24-00
RESPONSE FORMALITY REVIEW			11/30/00

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
staple additional sheet here

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Form PTO-436A  
(Rev. 6/99)